## PART B - FEE(S) TRANSMITTAL

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3/06/2005 MBERHE1 000	00074 09975169				Sharon R.		(Depositor's name)	
FC:2501 FC:1504				Sharon June 1	R. Stoyd , 2005	(Signature) (Date)		
APPLICATION NO.	FILING DATE	FIRST NAME		INVEN	VTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
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	or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  THE PATENT (print or type)  data will appear on the patent. If an assignee is identified below, the document has been filed for IT a substitute for filing an assignment.							
recordation as set forth in (A) NAME OF ASSIGNI					g an assignment.  Y and STATE OR CO			
Polychromix	, Inc.		Wiln	ning	gton, MA			
lease check the appropriate	assignee category or catego	ries (will not be p	rinted on the pate	ent) :	☐ Individual <b>XX</b> C	orporation or other private gr	roup entity Government	
☑ Issue Fee ☑ A che					check in the amount of the fee(s) is enclosed.  yment by credit card. Form PTO-2038 is attached.			
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Docket No.: P0743-7001

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Erik R. Deutsch, et al.

Serial No:

09/975,169

Confirmation. No.:

9099

Filed:

October 11, 2001

For:

ACTUATABLE DIFFRACTIVE OPTICAL PROCESSOR

Examiner:

Cherry, Euncha P.

Art Unit:

2872

## **CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)**

The undersigned hereby certifies that this document is being placed in the United States mail with first-class postage attached, addressed to Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the 15th day of June, 2005.

Sharon R. Lloyd

Mail Stop Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith are the following documents:

- [X]Part B-Fee Transmittal
- [X] Return Receipt Postcard

If the enclosed papers are considered incomplete, the Mail Room and/or the Application Branch is respectfully requested to contact the undersigned at (617) 395-7000.

Serial No.: 09/975,169 Docket No.: P0743-7001

Page 2 of 2

The applicants claim small entity status. A check for \$1,000.00 is enclosed. If the fee required differs from the amount enclosed, the Commissioner is hereby authorized to charge any underpayment to or refund any overpayment to Deposit Account No. 50/2762.

Respectfully submitted, Erik R. Deutsch, et al., Applicants

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